

PTO/SB/21 (09-04)

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	09/485,245-Conf. #1697
		Filing Date	March 27, 2000
		First Named Inventor	Alison Hopkins
		Art Unit	1637
		Examiner Name	C. B. Wilder
Total Number of Pages in This Submission		Attorney Docket Number	28911/36128

### ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Remarks	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	MARSHALL, GERSTEIN & BORUN LLP		
Signature			
Printed name	Jeffrey S. Sharp		
Date	December 13, 2004	Reg. No.	31,879

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV456046993US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: December 13, 2004

Signature: (Juan Quintero)

# FEE TRANSMITTAL For FY 2005

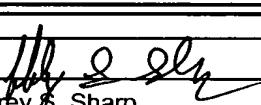
(Reflects USPTO filing fees in effect from 12/\_\_\_/04)

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 950.00)

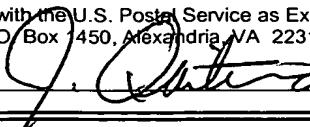
Complete if Known	
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METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)																																																																																																																		
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Deposit Account <input type="checkbox"/> None  Deposit Account Number <b>13-2855</b>  Deposit Account Name <b>MARSHALL, GERSTEIN &amp; BORUN LLP</b>			<b>2. EXTRA CLAIM FEES</b> <table border="1"> <thead> <tr> <th>Fee Description</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>Each claim over 20</td> <td>50</td> <td>25</td> </tr> <tr> <td>Each independent claim over 3</td> <td>200</td> <td>100</td> </tr> <tr> <td>Multiple dependent claims</td> <td>360</td> <td>180</td> </tr> <tr> <td>For Reissues, each claim over 20 and more than in the original patent</td> <td>50</td> <td>25</td> </tr> <tr> <td>For Reissues, each independent claim more than in the original patent</td> <td>200</td> <td>100</td> </tr> </tbody> </table> Total Claims - = Extra Claims x Fee (\$) = Fee Paid (\$)  Indep. Claims - = Extra Claims x Fee (\$) = Fee Paid (\$)  Multiple Dependent Claims Fee (\$) Fee Paid (\$)  <b>Subtotal (2) \$ 0.00</b>			Fee Description	Fee (\$)	Small Entity Fee (\$)	Each claim over 20	50	25	Each independent claim over 3	200	100	Multiple dependent claims	360	180	For Reissues, each claim over 20 and more than in the original patent	50	25	For Reissues, each independent claim more than in the original patent	200	100																																																																																														
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SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	31,879
Name (Print/Type)	Jeffrey B. Sharp	Date	December 13, 2004

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Signature: 

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